



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Branko D. Kovacevic

Title: SYSTEM AND METHOD FOR RECEPTION, PROCESSING
AND TRANSMISSION OF DIGITAL AUDIO STREAM

App. No.: 09/800,225

Filed: 03-06-2001

Examiner: Unknown

Group Art Unit: 2661

Atty. Dkt. No. ATI.0100440

Application Processing Division
Customer Correction Branch
Assistant Secretary in Connection with
Patents and Trademarks
U.S. Patent & Trademark Office
Washington, D.C. 20231

REQUEST FOR CORRECTED FILING RECEIPT

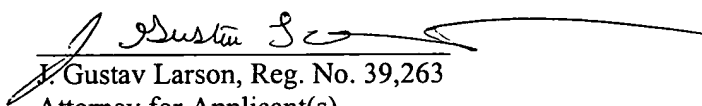
Dear Sir:

Please make the indicated corrections as shown on the enclosed Filing Receipt. Please correct the page count of drawings from 11 to 12 due to the Notice to File Corrected Application Papers. Please contact me at the below-listed telephone number if you have any questions or need additional information.

Respectfully submitted,

Date

8-14-01


J. Gustav Larson, Reg. No. 39,263
Attorney for Applicant(s)
Simon, Galasso & Frantz, PLC
P.O. Box 26503
Austin, Texas 78755-0503
(512) 336-8957 (phone)
(512) 336-9155 (fax)



UNITED STATES PATENT AND TRADEMARK OFFICE

COPY

 COMMISSIONER FOR PATENTS
 UNITED STATES PATENT AND TRADEMARK OFFICE
 WASHINGTON, D.C. 20231
 www.uspto.gov

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/800,225	03/06/2001	2661	908	ATI.0100440	11 12	31	2

 27412
 SIMON, GALASSO & FRANTZ PLC
 P.O. BOX 26503
 AUSTIN, TX 78755-0503


CONFIRMATION NO. 3322

FILING RECEIPT



OC000000005970176

Date Mailed: 07/26/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Branko D. Kovacevic, Willowdale, CANADA;

Domestic Priority data as claimed by applicant

Foreign Applications

If Required, Foreign Filing License Granted 04/12/2001

Projected Publication Date: To Be Determined - pending completion of Corrected Papers

Non-Publication Request: No

Early Publication Request: No

Title

System and method for reception, processing and transmission of digital audio stream

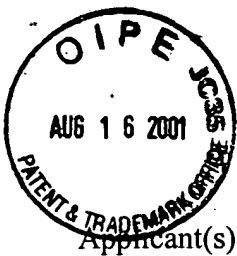
Preliminary Class

370

Data entry by : LE, HANH

Team : OIPE

Date: 07/26/2001



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Branko D. Kovacevic

Title: SYSTEM AND METHOD FOR RECEPTION, PROCESSING AND
TRANSMISSION OF DIGITAL AUDIO STREAM

App. No.: 09/800,225

Filed: 03-06-2001

Examiner: Unknown

Group Art Unit: 2661

Atty. Dkt. No. ATI.0100440

Attention: Box Missing Parts
Honorable Commissioner of
Patents and Trademarks
Washington, D.C. 20231

RESPONSE TO NOTICE TO FILE CORRECTED APPLICATION PAPERS

Dear Sir:

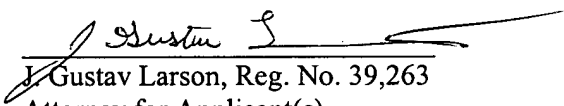
In response to the Notice to File Corrected Application Papers mailed July 26, 2001, please find enclosed herewith:

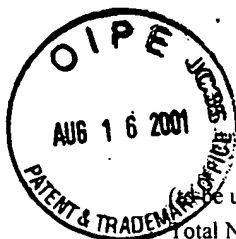
- ☒ a Transmittal Form;
- ☒ a copy of the Notice to File Corrected Application Papers;
- ☒ a Request for Corrected Filing Receipt;
- ☒ 12 Sheets of Formal Drawings; and
- ☒ a return postcard.

Respectfully submitted,

8-14-01

Date


Gustav Larson, Reg. No. 39,263
Attorney for Applicant(s)
Simon, Galasso & Frantz, PLC
P.O. Box 26503
Austin, Texas 78755-0503
(512) 336-8597 (phone)
(512) 336-9155 (fax)



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)
Total Number of Pages in this Submission 16

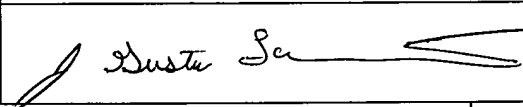
Application Number: 09/800,225
Filing Date: 03-06-2001
First Named Inventor: **Branko D. Kovacevic**
Group Art Unit: 2661
Examiner: **Unknown**
Attorney Docket No.: **ATI.0100440**

RECEIPT

ENCLOSURES (check all that apply)

- | | | |
|--|---|---|
| <input type="checkbox"/> Fee Transmittal Form
<input type="checkbox"/> Fee Attached
<input type="checkbox"/> Amendment/Response
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/Declaration(s)
<input type="checkbox"/> Extension of Time Request
<input type="checkbox"/> Express Abandonment Request
<input type="checkbox"/> Information Disclosure Statement
<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Response to Missing Parts/Incomplete Application
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application)
<input type="checkbox"/> Drawing(s)
<input type="checkbox"/> Licensing-related Papers
<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition
<input type="checkbox"/> To Convert a Provisional Application
<input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address
<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Small Entity Statement
<input type="checkbox"/> Request for Refund
<input type="checkbox"/> After Allowance Communication to Group | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Request for Corrected Filing Receipt
<input type="checkbox"/> Letter to Draftsperson
<input type="checkbox"/> Formal Drawings (after initial filing)
<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Request for Corrected Assignment
<input checked="" type="checkbox"/> Response to Notice to File Corrected Application Papers
<input type="checkbox"/> Additional Enclosure(s) (please identify below): |
|--|---|---|

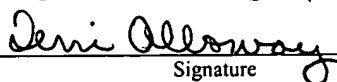
Remarks:

Firm Name	Simon, Galasso & Frantz, PLC P.O. Box 26503 Austin, Texas 78755-0503	
Signature of Applicant, Attorney, or Agent		
Name and Registration No.:	J. Gustav Larson, Reg. No. 39,263	Date: 8-14-01

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to Assistant Commissioner for Patents, Washington, D.C. 20231 on 8-14-01.

Terri Alloway
Typed or Printed Name


Signature



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/800,225	03/06/2001	Branko D. Kovacevic	ATI.0100440

CONFIRMATION NO. 3322

FORMALITIES LETTER



OC000000005970177

27412
SIMON, GALASSO & FRANTZ PLC
P.O. BOX 26503
AUSTIN, TX 78755-0503

Date Mailed: 07/26/2001

NOTICE TO FILE CORRECTED APPLICATION PAPERS

Filing Date Granted

This application has been accorded an Application Number and Filing Date. The application, however, is informal since it does not comply with the regulations for the reason(s) indicated below. Applicant is given **TWO MONTHS** from the date of this Notice within which to correct the informalities indicated below. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a)

The required item(s) identified below must be timely submitted to avoid abandonment:

- Substitute drawings in compliance with 37 CFR 1.84 because:
 - drawing sheets do not have the appropriate margin(s) (see 37 CFR 1.84(g)). Each sheet must include a top margin of at least 2.5 cm. (1 inch), a left side margin of at least 2.5 cm. (1 inch), a right side margin of at least 1.5 cm. (5/8 inch), and a bottom margin of at least 1.0 cm. (3/8 inch);

*A copy of this notice **MUST** be returned with the reply.*

Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE